

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2001

Application or Docket Number

PRO 0903-U.S.  
09/987,643

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                          |              |
|----------------------------------|--------------------------|--------------|
| TOTAL CLAIMS                     | <i>40</i>                |              |
| FOR                              | NUMBER FILED             | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS          | <i>28</i> minus 20 =     | <i>8</i>     |
| INDEPENDENT CLAIMS               | <i>2</i> minus 3 =       | <i>-1</i>    |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-----------|---|------------------|
|  | Total                                     | <i>20</i> | Minus                                       | <i>20</i>        |
| Independent                                    | <i>2</i>                                  | Minus     | <i>3</i>                                    | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>                  |           |   |                  |

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SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES       | RATE         | FEES   |
|-----------|------------|--------------|--------|
| BASIC FEE | 370.00     | OR BASIC FEE | 740.00 |
| X\$ 9=    | ---        | OR X\$18=    | ---    |
| X42=      | ---        | OR X84=      | ---    |
| +140=     | ---        | OR +280=     | ---    |
| TOTAL     | <i>370</i> | OR TOTAL     |        |

OTHER THAN  
SMALL ENTITY

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|--------------------|------------------------|
| X\$ 9=          | /                      | OR X\$18=          | /                      |
| X42=            | /                      | OR X84=            | /                      |
| +140=           | /                      | OR +280=           | /                      |
| TOTAL ADDT. FEE |                        | OR TOTAL ADDT. FEE |                        |

AMENDMENT B

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-----------|---|------------------|
|  | Total                                     | <i>22</i> | Minus                                       | <i>20</i>        |
| Independent                                    | <i>2</i>                                  | Minus     | ---   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>                  |           |   |                  |

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|--------------------|------------------------|
| <i>55.95</i>    | <i>50</i>              | OR X\$18=          |                        |
| X42=            |                        | OR X84=            |                        |
| +140=           |                        | OR +280=           |                        |
| TOTAL ADDT. FEE | <i>50</i>              | OR TOTAL ADDT. FEE |                        |

AMENDMENT C

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | ---   | Minus                                       | ---              |
| Independent                                    | ---                                       | Minus | ---   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>                  |       |   |                  |

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|--------------------|------------------------|
| X\$ 9=          |                        | OR X\$18=          |                        |
| X42=            |                        | OR X84=            |                        |
| +140=           |                        | OR +280=           |                        |
| TOTAL ADDT. FEE |                        | OR TOTAL ADDT. FEE |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.